

**DECLARATION OF ADELITA OREFICE**

I, Adelita Orefice, declare as follows:

1. I am a resident of the State of Connecticut. I am over the age of 18 and have personal knowledge of all the facts stated herein, except for those matters stated upon information and belief; as to those matters, I believe them to be true. If called as a witness, I could and would testify competently to the matters set forth below.
2. I am currently employed by the State of Connecticut Department of Public Health (hereinafter DPH) as Deputy Commissioner and Acting Chief Operating Officer.
3. As the Acting Chief Operating Officer, I direct, oversee, and lead DPH staff responsible for all DPH contracts, grants, payments, and budgeting. In this position I also direct, oversee, and lead the DPH Project Management Office, Customer Service & Local Health Office, and Internal Audit Office and am responsible for coordinating with our embedded information technology and labor relations partners.
4. As the Deputy Commissioner I am a member of and work with DPH's leadership team to help develop and execute the strategic mission of DPH, as determined by the Commissioner. I also provide direct leadership and direction to the Health Statistics & Surveillance Section, Public Health Laboratory, Healthcare Quality & Safety Branch, Operational & Support Services, and Infectious Disease Branch. Finally, I am the leadership point of contact for several offices within DPH's Office of the Commissioner, including the Data Management and Governance Office, the Legal Office, the Office of Policy, Legislation & Regulatory Affairs, and the Senior Advisor for Long Term Care.
5. On March 25, 2025, without any prior notice or indication, DPH received three (3) award terminations from the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (hereinafter CDC) indicating that numerous grant awards were

being terminated, effective immediately. A true and correct copy of the grant award terminations are attached as **Exhibit A**.

6. The termination notices all indicated that such terminations were “for cause” based on the end of the COVID pandemic, rather than failure of DPH to follow the terms or conditions of the grants. Each award termination uses the same identical form language stating that the end of the COVID pandemic provides cause to terminate the grant. Descriptions of each award and the effects of these terminations follow.

7. DPH relied and acted upon its expectation and understanding that HHS would fulfill its commitment to provide each of these grant awards in the execution of contracts, purchase of goods and services, and the hiring of staff.

#### **A. Epidemiology and Laboratory Capacity (ELC) Grants**

8. Since 1995, CDC has been providing ELC funds to DPH as a cooperative agreement. The purpose of these funds is to help states build laboratory and disease tracking capacity.

9. In 2020 and 2021, during the COVID-19 Pandemic, CDC awarded additional ELC grants to states, including Connecticut, in an effort to help states build infrastructure needed to respond to the ongoing pandemic and prepare for future public health emergencies.

10. While the funds were initially awarded to battle COVID, CDC recognized that most states lacked the disease surveillance and laboratory infrastructure to maintain a pandemic response, so states were encouraged and allowed to invest these funds in strengthening these capacities.

11. ELC funds that are the subject of the March 24, 2025 termination fully or partially fund fifty-one (51) staff positions within DPH.

12. ELC awards that are the subject of the March 24, 2025 termination total \$397,615,844. Of that, approximately \$240.7 million has been expended on completed projects. Roughly \$156.9 million remains, which was allocated to ongoing efforts which will cease under these terminations.

13. These ELC funds were used for data system infrastructure improvements, increasing DPH's capacity to respond to infectious diseases, and investing in DPH's laboratory testing capacity, with a majority of such funds used to create or upgrade electronic data systems that support: infectious disease and symptom surveillance; the state public health laboratory; and access to vital records.

a) Data System Infrastructure Improvements

i) Infectious Disease and Symptom Surveillance

14. DPH monitors the emergence and spread of disease in two ways. First, by monitoring symptoms (syndromic surveillance) whereby DPH receives near real-time information on why people are seeking care in emergency rooms, such as opioid overdoses, headache, firearm injury, etc. The second is by tracking the spread and prevalence of known diseases throughout the state (disease surveillance).

15. To fortify these capabilities, DPH utilized ELC funds for upgrades to the data systems for infectious disease and symptom surveillance. Specifically, DPH: (a) purchased licenses for Casetivity, a system accessible to providers to report results of tests done in offices for flu, COVID-19, and child blood lead levels; (b) purchased licenses for PowerBI, software

that allowed DPH to share real time data reports with stakeholders, including reports on nursing home capacity, hospital bed capacity, and flu/COVID/RSV/mpox rates; (c) developed a portal to provide local health departments with line level reportable disease data; (d) implemented an electronic case reporting system for providers to report to DPH to support case management and reporting; and (e) invested in cloud servers to support modernization efforts that have improved staff workflows.

16. The impacts of the loss of the ELC funding for data system upgrades for infectious disease and symptom surveillance, include:

- Point of care testing results will no longer be sent to DPH.
- DPH will be unable to share real-time reports on healthcare capacity or disease spread.
- Local health departments will be less able to respond to infectious disease outbreaks.
- DPH will lose access to cloud-based services that will harm the department's ability to generate and access routine analytics.
- DPH will no longer receive automated disease reports from providers. Instead, providers will be required to fax reportable disease case reports to DPH.
- DPH will not be able to update our data exchange platform to a system which 90% of states currently use.
- Newborn screening test reporting critical to timely treatment interventions will remain a manual process.
- The active project to upgrade DPH's syndromic surveillance system is halted.

- DPH will no longer have a syndromic surveillance platform. This prevents DPH from being able to know if there is a new syndrome or a disease we know (e.g., respiratory illness) with which people are presenting to emergency departments.
- DPH will lose access to information on emergency room trends in the state, limiting DPH's ability to respond to and alert partners and local health of emergencies.
- DPH will no longer be able to assist with measurement of healthcare capacity (e.g., high rates of ED visits and potential impacts to hospitals and surrounding healthcare systems).

ii) State Public Health Laboratory

17. Among its other responsibilities, DPH is responsible for running the state public health laboratory ("State Lab"). The State Lab provides extensive clinical and environmental testing services for the benefit of the people of Connecticut, including, but not limited to, clinical support testing (i.e., laboratory testing to assist providers make diagnoses); (2) environmental contaminate detection (i.e., testing to identify contaminants like lead or PFAS in submitted lead or PFAS in submitted samples); and (3) newborn screenings (i.e., laboratory screening tests for genetic diseases that are performed for every newborn in the state).

18. A data modernization initiative at the State Lab was long overdue. The State Lab has an outdated electronic data system that struggles to communicate with other systems, including electronic health record systems, and is inefficient. The ELC funds for upgrades to the State Lab's data systems were used toward the goal of creating a modern informatics system to

support the clinical support testing, environmental contaminate detection program, and newborn screening functions of the State Lab.

19. This upgrade to the State Lab's data systems would allow for real time ordering of testing and the automated distribution of test results. To date, the ELC funding has been used to purchase the informatics system and build the infrastructure to support it; the fiber optics installation has been selected and approved; and contractors have been hired to work on the implementation of the system.

20. The impacts of the loss of the ELC funding for the State Lab, include:

- The data system upgrades will not be completed and **tens of millions of dollars spent to date will be wasted.**
- Lab tests will not be completed or reported timely, including newborn screening tests.
- Fiber optics installation will not be completed, which will degrade the state's ability to process and analyze genomic data.

iii) Vital Records

21. Like the State Lab's data management systems, DPH's vital records systems are similarly in need of modernization. The goal for modernization of vital records data systems was to transition from a paper-based registration to an electronic registration system for both birth and death registries and ultimately combining the two registries into a single registry. This would allow for real time data exchange with the CDC. The ELC funds for this data modernization project have been used to create and implement the electronic death registry and a 24/7 help desk.

22. The impacts of the loss of the ELC funding for data system upgrades at the state lab, include:

- Inability to implement the electronic birth registry.
- Death and birth registries will not be combined.
- DPH is unable to hire staff to input data into the death registry.
- DPH is unable to operate the 24/7 help desk which is utilized by funeral directors, healthcare organizations, and local registrars to report and verify deaths.
- The ongoing project to improve data exchange with chief medical examiner will be halted.
- The ongoing project to create real time exchange of data with CDC is halted.

b) Infectious Disease Capacity

23. In addition to the ELC funds for data modernization projects, ELC funds were used to expand infectious disease and laboratory capacity.

24. ELC funds have been used to hire additional staff to conduct syndromic surveillance and wastewater testing, to receive electronic data reports at the state lab and automate those reports, and to support local health departments during public health outbreaks like mpox and avian influenza. In addition, this funding was used to provide innovative and effective infection prevention and control training for healthcare workers to strengthen healthcare and improve patient safety, and to educate nursing home staff on the risks of COVID-19 and how to protect residents and themselves.

25. The impacts of the loss of this funding include:

- DPH will lose staff who respond to outbreaks.

- DPH will lose routine infectious disease monitoring capabilities that inform healthcare providers and the public on disease spread in their communities.
- DPH will lack of staff to adequately provide data and recommendations to healthcare providers on disease outbreaks or healthcare associated infections.

c) Laboratory Capacity

26. In addition to halting the data modernization project at the State Lab, the cuts to ELC funding will also result in degradation of the State Lab's ability to conduct genomic sequencing for viruses and bacteria and susceptibility testing for pathogens patients acquire in healthcare settings as the cuts will result in a loss of State Lab staff. This reduction in State Lab staff will also reduce DPH's ability to provide testing support in emergency outbreak situations, including avian influenza, Ebola, and resistant healthcare associated infections.

**B. Grants for Immunization Activities**

27. In addition to the ELC grants, during the COVID-19 Pandemic, CDC issued multiple funding awards to DPH for the purpose of supporting immunization efforts in the state. On March 24, 2025, CDC notified DPH that eight of those award grants had been canceled. As of now, approximately \$65.6 million of those award funds has been expended on completed projects. Roughly \$13.3 million remains, which was allocated to ongoing efforts that will cease due to this termination.

28. In addition to helping the state design and implement a vaccination plan for COVID-19, these funds were intended to enhance the state's influenza vaccination program, and to expand vaccination programs for underserved populations.



29. The canceled immunization awards fully or partially funded eight (8) staff positions within DPH.

a) Local Health Immunization Programs

30. With this CDC immunization funding, DPH entered into 43 contracts with local health departments to support staff and partnerships that enhance vaccination capacity, access equity, and confidence throughout the state. Vaccination clinics were established and mobile outreach was conducted in underserved neighborhoods. Educational materials and social media campaigns were developed and distributed to spread the message about the importance of vaccinations.

31. The abrupt cancelation of the CDC immunization grants has forced DPH to issue stop work notices to each local health department that was funding immunization programs through these awards and this loss of funding will weaken the state's ability to respond to outbreaks, such as measles.

b) Connecticut's Immunization Information System (CT WiZ)

32. Connecticut's immunization information system, known as CT WiZ, is an electronic system that maintains accurate, complete, and timely immunization records for all Connecticut residents. It provides real-time access to official records to healthcare providers, schools, and the public, supporting vaccine administration, inventory management, and outbreak response. Initially, CT WiZ only captured data on childhood vaccination; however, the database was later expanded to include all adult vaccination in addition to childhood vaccination.

33. The immunization awards recently canceled by CDC were used to implement a portal that allows the public to access their immunization records, including mobile phone record download capability. The funds were also used to make enhancements to the system to ensure accuracy, create interfaces with other systems including interstate data exchange, and provide a real-time public facing dashboard on vaccination rates in the state.

34. The loss of this funding means that automated reports for overdue vaccines may no longer be sent to providers, potentially decreasing vaccination rates and creating challenges for compliance with vaccine schedules. Moreover, work on enhancements to the vaccine management module, data quality improvements, data connection with Medicaid, and additional data modernizations have stopped.

### **C. Health Disparities Grant**

35. In 2021, the CDC awarded DPH \$17,394,074 through the National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved. The intent of the investment was to reduce disparities, improve data collection, strengthen public health infrastructure, and mobilize community partnerships. The grant supported over two dozen equity-focused initiatives across the state. As of now, approximately \$12.9 million has been expended on completed projects. Roughly \$4.5 million remains, which was allocated to ongoing efforts set to continue through 2026.

36. The canceled health disparities awards fully or partially fund three (3) staff positions within DPH.

37. The impacts of the loss of this funding include:

- Rural health departments will lose essential financial support.

- Consultant work on data analytics and Health Professionals Shortage Areas scoring improvements in the primary care office will cease.
- Projects with the Connecticut State Department of Education will halt, including parent trust after school programs and the teen parent equity initiative.
- DPH will be unable to fund the Family Bridge program which funds visits from healthcare practitioners to new mothers.

38. The termination of the grant awards detailed in this declaration will cause immediate and lasting harm to DPH, and the people of the State of Connecticut, and will impede DPH's ability to protect the public health.

I declare under penalty of perjury under the laws of the United States that, to the best of my knowledge, the foregoing is true and correct.

Executed on March 28, 2025, at Hartford, CT.

A handwritten signature in blue ink, appearing to read 'Adelita Orefice', with a long horizontal flourish extending to the right.

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Adelita Orefice, Esq., M.P.M.

# EXHIBIT A

**Recipient Information****1. Recipient Name**

DEPARTMENT OF PUBLIC HEALTH  
CONNECTICUT  
410 Capitol Ave  
Hartford, CT 06106-1367  
[NO DATA]

**2. Congressional District of Recipient**

01

**3. Payment System Identifier (ID)**

1066000798A9

**4. Employer Identification Number (EIN)**

066000798

**5. Data Universal Numbering System (DUNS)**

807853791

**6. Recipient's Unique Entity Identifier (UEI)**

RFZKKT5RU3F8

**7. Project Director or Principal Investigator**

Dr. Lynn E Sosa  
Acting State Epidemiologist  
lynn.sosa@ct.gov  
860-509-7723

**8. Authorized Official**

Mr. Chukwuma Amechi  
Chief, Fiscal Services  
Chukwuma.Amechi@ct.gov  
860-509-7233

**Federal Agency Information**

CDC Office of Financial Resources

**9. Awarding Agency Contact Information**

Whitney Dade  
Grants Management Specialist  
zmm8@cdc.gov  
4044983038

**10. Program Official Contact Information**

Andrea Grangent  
Program Officer  
qqd0@cdc.gov  
4044984722

**Federal Award Information****11. Award Number**

6 NU50CK000524-05-13

**12. Unique Federal Award Identification Number (FAIN)**

NU50CK000524

**13. Statutory Authority**

301(A)AND317(K)(2)PHS42USC241(A)247B(K)2

**14. Federal Award Project Title**

Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) - Building and Strengthening  
Epidemiology, Laboratory and Health Information Systems Capacity in State and Local Health Departments

**15. Assistance Listing Number**

93.323

**16. Assistance Listing Program Title**

Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)

**17. Award Action Type**

Administrative Action

**18. Is the Award R&D?**

No

**Summary Federal Award Financial Information**

**19. Budget Period Start Date** 08/01/2023 - **End Date** 03/24/2025

**20. Total Amount of Federal Funds Obligated by this Action** \$0.00

20a. Direct Cost Amount \$0.00

20b. Indirect Cost Amount \$0.00

**21. Authorized Carryover** \$158,399.00

**22. Offset** \$517,314.00

**23. Total Amount of Federal Funds Obligated this budget period** \$7,390,347.00

**24. Total Approved Cost Sharing or Matching, where applicable** \$0.00

**25. Total Federal and Non-Federal Approved this Budget Period** \$7,390,347.00

**26. Period of Performance Start Date** 08/01/2019 - **End Date** 03/24/2025

**27. Total Amount of the Federal Award including Approved  
Cost Sharing or Matching this Period of Performance** \$490,221,894.04

**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

**29. Grants Management Officer - Signature**

Percy Jernigan

**30. Remarks**

Department Authority



## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU50CK000524-05-13

FAIN# NU50CK000524

Federal Award Date: 03/24/2025

**Recipient Information****Recipient Name**

DEPARTMENT OF PUBLIC HEALTH  
CONNECTICUT  
410 Capitol Ave  
Hartford, CT 06106-1367  
[NO DATA]

**Congressional District of Recipient**

01

**Payment Account Number and Type**

1066000798A9

**Employer Identification Number (EIN) Data**

066000798

**Universal Numbering System (DUNS)**

807853791

**Recipient's Unique Entity Identifier (UEI)**

RFZKKT5RU3F8

**31. Assistance Type**

Cooperative Agreement

**32. Type of Award**

Other

**33. Approved Budget**

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only

II. Total project costs including grant funds and all other financial participation

a. Salaries and Wages	\$4,225,709.00
b. Fringe Benefits	\$3,110,602.00
c. Total Personnel Costs	\$7,336,311.00
d. Equipment	\$158,399.00
e. Supplies	\$18,374.00
f. Travel	\$0.00
g. Construction	\$0.00
h. Other	\$44,121.00
i. Contractual	\$0.00
j. TOTAL DIRECT COSTS	\$7,557,205.00
k. INDIRECT COSTS	\$508,855.00
l. TOTAL APPROVED BUDGET	\$8,066,060.00
m. Federal Share	\$8,066,060.00
n. Non-Federal Share	\$0.00

**34. Accounting Classification Codes**

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
0-9390F7F	19NU50CK000524C4	CK	41.51	93.323	\$0.00	75-X-0140
0-9390EWQ	19NU50CK000524C3	CK	41.51	93.323	\$0.00	75-2024-0943
0-9390ESY	19NU50CK000524CV	CK	41.51	93.323	\$0.00	75-2022-0943
1-9390GKT	19NU50CK000524DEXC5	CK	41.51	93.323	\$0.00	75-2122-0140



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU50CK000524-05-13

FAIN# NU50CK000524

Federal Award Date: 03/24/2025

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

## **AWARD ATTACHMENTS**

DEPARTMENT OF PUBLIC HEALTH CONNECTICUT

6 NU50CK000524-05-13

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1. REVISED: TERMS AND CONDITIONS



## **TERMS AND CONDITIONS OF AWARD**

**Termination:** The purpose of this amendment is to terminate the use of any remaining COVID-19 funding associated with this award. The termination of this funding is for cause. HHS regulations permit termination if “the non-Federal entity fails to comply with the terms and conditions of the award”, or separately, “for cause.” The end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out. Termination of use of funding under the listed document number(s) is effective as of the date set out in your Notice of Award.

Impacted document numbers are included on page 2 of this Notice of Award (NoA).

No additional activities can be conducted, and no additional costs may be incurred, as it relates to these funds. Unobligated award balances of COVID-19 funding will be de-obligated by CDC. Award activities under other funding may continue consistent with the terms and conditions of the award.

**Final Federal Financial Report (FFR, SF-425):** Within 30 days please submit final FFR’s for impacted document numbers. The FFR should only include those funds authorized and expended during the timeframe covered by the report. The final report must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Should the amount not match with the final expenditures reported to the Payment Management System (PMS), you will be required to update your reports to PMS accordingly.

**All other terms and conditions of this award remain in effect.**

**Recipient Information****1. Recipient Name**

DEPARTMENT OF PUBLIC HEALTH  
CONNECTICUT  
410 Capitol Ave  
Hartford, CT 06106-1367  
[NO DATA]

**2. Congressional District of Recipient**  
01**3. Payment System Identifier (ID)**

1066000798A9

**4. Employer Identification Number (EIN)**

066000798

**5. Data Universal Numbering System (DUNS)**

807853791

**6. Recipient's Unique Entity Identifier (UEI)**

RFZKKT5RU3F8

**7. Project Director or Principal Investigator**

Ms. Deepa Mavani  
deepa.mavani@ct.gov  
860-509-7929

**8. Authorized Official**

Mr. Chukwuma Amechi  
Chief, Fiscal Services  
Chukwuma.Amechi@ct.gov  
860-509-7233

**Federal Agency Information**

CDC Office of Financial Resources

**9. Awarding Agency Contact Information**

Wayne Woods  
kuv1@cdc.gov  
770-488-2948

**10. Program Official Contact Information**

Ms. Randi Tolstyk  
Public Health Advisor  
kkq9@cdc.gov  
770-488-5114

**Federal Award Information****11. Award Number**

6 NH23IP922602-05-10

**12. Unique Federal Award Identification Number (FAIN)**

NH23IP922602

**13. Statutory Authority**

Sections 317, 317(k)(2) of the Public Health Service Act (42 U.S.C. Sections 247b, 247b(k)(2) and 247c), as amended.

**14. Federal Award Project Title**

CDC-RFA-IP19-1901 Immunization and Vaccines for Children

**15. Assistance Listing Number**

93.268

**16. Assistance Listing Program Title**

Immunization Cooperative Agreements

**17. Award Action Type**

Administrative Action

**18. Is the Award R&D?**

No

**Summary Federal Award Financial Information****19. Budget Period Start Date** 07/01/2023 - **End Date** 03/24/2025**20. Total Amount of Federal Funds Obligated by this Action** \$0.00

20a. Direct Cost Amount \$0.00

20b. Indirect Cost Amount \$0.00

**21. Authorized Carryover** \$18,933,263.00**22. Offset** \$986,983.00**23. Total Amount of Federal Funds Obligated this budget period** \$16,498,105.00**24. Total Approved Cost Sharing or Matching, where applicable** \$0.00**25. Total Federal and Non-Federal Approved this Budget Period** \$16,498,105.00**26. Period of Performance Start Date** 07/01/2019 - **End Date** 03/24/2025**27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance** \$117,704,376.00**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

**29. Grants Management Officer – Signature**

Percy Jernigan

**30. Remarks**

Department Authority



## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Notice of Award

Centers for Disease Control and Prevention

Award# 6 NH23IP922602-05-10

FAIN# NH23IP922602

Federal Award Date: 03/24/2025

**Recipient Information****Recipient Name**

DEPARTMENT OF PUBLIC HEALTH  
CONNECTICUT  
410 Capitol Ave  
Hartford, CT 06106-1367  
[NO DATA]

**Congressional District of Recipient**

01

**Payment Account Number and Type**

1066000798A9

**Employer Identification Number (EIN) Data**

066000798

**Universal Numbering System (DUNS)**

807853791

**Recipient's Unique Entity Identifier (UEI)**

RFZKKT5RU3F8

**31. Assistance Type**

Cooperative Agreement

**32. Type of Award**

Other

**33. Approved Budget**

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only

II. Total project costs including grant funds and all other financial participation

a. Salaries and Wages	\$4,714,298.00
b. Fringe Benefits	\$4,520,512.00
c. Total Personnel Costs	\$9,234,810.00
d. Equipment	\$0.00
e. Supplies	\$177,685.00
f. Travel	\$119,486.00
g. Construction	\$0.00
h. Other	\$8,250,595.00
i. Contractual	\$16,650,202.00
j. TOTAL DIRECT COSTS	\$34,432,778.00
k. INDIRECT COSTS	\$1,985,573.00
l. TOTAL APPROVED BUDGET	\$36,418,351.00
m. Federal Share	\$36,418,351.00
n. Non-Federal Share	\$0.00

**34. Accounting Classification Codes**

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
0-9390EWQ	19NH23IP922602C3	IP	41.51	93.268	\$0.00	75-2024-0943
1-9390FG3	20NH23IP922602C3	IP	41.51	93.268	\$0.00	75-2024-0943
1-9390GKL	20NH23IP922602C5	IP	41.51	93.268	\$0.00	75-2124-0943
1-9390GWA	20NH23IP922602C6	IP	41.51	93.268	\$0.00	75-X-0943
2-9390K9M	20NH23IP922602HSC6	IP	41.51	93.268	\$0.00	75-X-0943



## DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NH23IP922602-05-10

FAIN# NH23IP922602

Federal Award Date: 03/24/2025

## Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

## **AWARD ATTACHMENTS**

DEPARTMENT OF PUBLIC HEALTH CONNECTICUT

6 NH23IP922602-05-10

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1. Terms and Conditions

#### **TERMS AND CONDITIONS OF AWARD**

**Termination:** The purpose of this amendment is to terminate the use of any remaining COVID-19 funding associated with this award. The termination of this funding is for cause. HHS regulations permit termination if “the non-Federal entity fails to comply with the terms and conditions of the award”, or separately, “for cause.” The end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out. Termination of use of funding under the listed document number(s) is effective as of the date set out in your Notice of Award.

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**Final Federal Financial Report (FFR, SF-425):** Within 30 days please submit final FFR’s for impacted document numbers. The FFR should only include those funds authorized and expended during the timeframe covered by the report. The final report must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Should the amount not match with the final expenditures reported to the Payment Management System (PMS), you will be required to update your reports to PMS accordingly.

**All other terms and conditions of this award remain in effect.**

**Recipient Information****1. Recipient Name**

DEPARTMENT OF PUBLIC HEALTH  
CONNECTICUT  
410 Capitol Ave  
Hartford, CT 06106-1367  
[NO DATA]

**2. Congressional District of Recipient**  
01**3. Payment System Identifier (ID)**  
1066000798A9**4. Employer Identification Number (EIN)**  
066000798**5. Data Universal Numbering System (DUNS)**  
807853791**6. Recipient's Unique Entity Identifier (UEI)**  
RFZKKT5RU3F8**7. Project Director or Principal Investigator**

Ms. Lisa Morrissey  
Deputy Commissioner  
lisa.morrissey@ct.gov  
860.509.7101

**8. Authorized Official**

Mr. Chukwuma Amechi  
Chief, Fiscal Services  
Chukwuma.Amechi@ct.gov  
860-509-7233

**Federal Agency Information**

CDC Office of Financial Resources

**9. Awarding Agency Contact Information**

Mr. Derick Wheeler, II  
Grants Management Specialist  
tie2@cdc.gov  
678-475-4972

**10. Program Official Contact Information**

Dr. Marie Downer  
Program Officer  
mld8@cdc.gov  
404-498-0609

**Federal Award Information****11. Award Number**

6 NH75OT000067-01-05

**12. Unique Federal Award Identification Number (FAIN)**

NH75OT000067

**13. Statutory Authority**

317(K)(2) OF PHSA 42USC 247B(K)(2)

**14. Federal Award Project Title**

Addressing COVID-19 Health Disparities Among High-Risk and Underserved Populations in Connecticut

**15. Assistance Listing Number**

93.391

**16. Assistance Listing Program Title**

Activities to Support State, Tribal, Local and Territorial (STLT) Health Department Response to Public  
Health or Healthcare Crises

**17. Award Action Type**

Terminate

**18. Is the Award R&D?**

No

**Summary Federal Award Financial Information**

**19. Budget Period Start Date** 06/01/2021 - **End Date** 03/24/2025

**20. Total Amount of Federal Funds Obligated by this Action** \$0.00

20a. Direct Cost Amount \$0.00

20b. Indirect Cost Amount \$0.00

**21. Authorized Carryover** \$0.00

**22. Offset** \$0.00

**23. Total Amount of Federal Funds Obligated this budget period** \$17,394,074.00

**24. Total Approved Cost Sharing or Matching, where applicable** \$0.00

**25. Total Federal and Non-Federal Approved this Budget Period** \$17,394,074.00

**26. Period of Performance Start Date** 06/01/2021 - **End Date** 03/24/2025

**27. Total Amount of the Federal Award including Approved  
Cost Sharing or Matching this Period of Performance** \$17,394,074.00

**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

**29. Grants Management Officer - Signature**

Mrs. Erica Stewart  
Team Lead, Grants Management Officer

**30. Remarks**

Department Authority



## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Notice of Award

Centers for Disease Control and Prevention

Award# 6 NH75OT000067-01-05

FAIN# NH75OT000067

Federal Award Date: 03/24/2025

**Recipient Information****Recipient Name**

DEPARTMENT OF PUBLIC HEALTH  
CONNECTICUT  
410 Capitol Ave  
Hartford, CT 06106-1367  
[NO DATA]

**Congressional District of Recipient**

01

**Payment Account Number and Type**

1066000798A9

**Employer Identification Number (EIN) Data**

066000798

**Universal Numbering System (DUNS)**

807853791

**Recipient's Unique Entity Identifier (UEI)**

RFZKKT5RU3F8

**31. Assistance Type**

Project Grant

**32. Type of Award**

Other

**33. Approved Budget**

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only

II. Total project costs including grant funds and all other financial participation

a. Salaries and Wages	\$751,158.00
b. Fringe Benefits	\$684,004.00
c. Total Personnel Costs	\$1,435,162.00
d. Equipment	\$0.00
e. Supplies	\$2,160.00
f. Travel	\$1,812.00
g. Construction	\$0.00
h. Other	\$833,532.00
i. Contractual	\$14,820,945.00
j. TOTAL DIRECT COSTS	\$17,093,611.00
k. INDIRECT COSTS	\$300,463.00
l. TOTAL APPROVED BUDGET	\$17,394,074.00
m. Federal Share	\$17,394,074.00
n. Non-Federal Share	\$0.00

**34. Accounting Classification Codes**

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390H06	21NH75OT000067C5	OT	41.51	93.391	\$0.00	75-2122-0140





## DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NH75OT000067-01-05

FAIN# NH75OT000067

Federal Award Date: 03/24/2025

## Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

## **AWARD ATTACHMENTS**

DEPARTMENT OF PUBLIC HEALTH CONNECTICUT

6 NH75OT000067-01-05

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1. Terms

## **TERMS AND CONDITIONS OF AWARD**

**Termination:** The purpose of this amendment is to terminate this award which is funded by COVID-19 supplemental appropriations. The termination of this award is for cause. HHS regulations permit termination if “the non-Federal entity fails to comply with the terms and conditions of the award”, or separately, “for cause.” The end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out. Termination of this award is effective as of the date set out in your Notice of Award.

No additional activities can be conducted, and no additional costs may be incurred. Unobligated award balances will be de-obligated by CDC.

**Closeout:** In order to facilitate an orderly closeout, we are requesting that you submit all closeout reports identified below within thirty (30) days of the date of this NoA. Submit the documentation as a “Grant Closeout” amendment in GrantSolutions. The reporting timeframe is the full period of performance. Please note, if you fail to submit timely and accurate reports, CDC may also pursue other enforcement actions per 45 CFR Part 75.371.

**Final Performance/Progress Report:** This report should include the information specified in the Notice of Funding Opportunity (NOFO). At a minimum, the report will include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant.
- List of publications resulting from the project, with plans, if any, for further publication.

**Final Federal Financial Report (FFR, SF-425):** The FFR should only include those funds authorized and expended during the timeframe covered by the report. The final report must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Should the amount not match with the final expenditures reported to the Payment Management System (PMS), you will be required to update your reports to PMS accordingly.

**Equipment and Supplies - Tangible Personal Property Report (SF-428):** A completed SF-428 detailing all major equipment acquired with a unit acquisition cost of \$10,000 or more. If no equipment was acquired under the award, a negative report is required